

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 CFR 1.53(b))

Attorney Docket No.

09792909-5728

First Named Inventor or Application Identifier

Yasushi Maruyama

Express Mail Label No: EV328248073US

ADDRESS TO: Mail Stop: Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

22386 U.S. PTO  
10/705553

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

## ACCOMPANYING APPLICATION PARTS

1. ☒ Specification Total Pages 32
2. ☒ Drawing(s) (35USC 113) Total Pages 6
3. ☒ Declaration and Power of Attorney Total Pages 3
  - a. ☒ Unexecuted(original or copy)
  - b. ☐ Copy from prior application (37CFR 1.63(d))  
(for continuation/divisional with Box 14 completed) [Note Box 4 Below]
  - i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting  
inventor(s) named in the prior appln.  
see 37 CFR 1.63(d)(2) and 1.33(b).
4. ☐ Incorporation By Reference (usable if Box 3b is checked)  
The entire disclosure of the prior application, from which  
a copy of the oath or declaration is supplied under Box  
3b, is considered as being part of the disclosure of the  
accompanying application and is hereby incorporated by  
reference therein.

5. ☐ Assignment Papers (cover sheet & documentation)
6. ☒ Letter under 37 CFR 1.41(c).
7. ☐ English Translation Document to follow (if applicable)
8. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
9. ☒ Preliminary Amendment
10. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
11. ☐ Small Entity ☐ Statement filed in prior Application,  
Statement(s) Status still proper and desired
12. ☐ Certified copy(ies) of .

14. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) ☐ of application No:

## CLAIMS AS FILED

(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) BASIC FEE
				\$770.00
TOTAL CLAIMS	21	1	\$18.00	\$18.00
INDEPENDENT CLAIMS	4	1	\$6.00	\$86.00
ANY MULTIPLE DEPENDENT CLAIMS?			290.00	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
TOTAL FEE				\$874.00

- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with this application, or credit any overpayment to ACCOUNT NO. 19-3140. A duplicate copy of this sheet is enclosed.
- ☒ Please charge attorney's firm American Express Account No. [REDACTED] in the amount of \$ 874.00 to cover the above fees. PTO Form 2038 is enclosed for that purpose.
- ☐ A check in the amount of \$        to cover the filing fee is enclosed.

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SIGNATURE

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Date: November 11, 2003